POSITION	INITIALS	ID NO.	DATE
	BA	*20385*	
FEE DETERMINATION		*48*	*4/27/00*
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW			
RESPONSE FORMALITY REVIEW		*71971*	*6/12*

INDEX OF CLAIMS

✔	.... Rejected		N	.... Non-elected
=	.... Allowed		I	.... Interference
–	(Through numeral)... Canceled		A	.... Appeal
÷	.... Restricted		O	.... Objected

Claim Final	Original	Date 9-5-00	14-5-01	7-23-01					
	10	✔	=	=					
	11	=	–	=					
	12	✔	✔	✔					
	13	6	0	0					
	14	✔	✔	✔					
	15	✔	✔	✔					
	16	0	0	0					
	17	✔	✔	✔					
	18	0	0	0					
	19	✔	✔	✔					
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	25	✔	✔	✔					
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If more than 150 claims or 10 actions
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